PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number 900155.401USPC	
FY 2008				
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Application Number 10/550,784			Filed I	uly 24, 2006
,				
For USE OF ACETYL-D-AMINOGLYCOSAMINE IN TREATMENT OF LOCAL LESIONS AND SYSTEMATIC SYMPTOMS RELATED TO INFECTIONS OF VIRUS OR BACTERIA				
Art Unit 1623			Examiner Elli Peselev	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a				
reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
lee below).	<u>Fee</u>	Small Entity Fee		
X One month (37 CFR 1.17(a)(1))	\$120	\$6	0	\$ <u>60</u>
 Two months (37 CFR 1.17(a)(2))	\$460	\$23	30	\$
Three months (37 CFR 1.17(a)(3))	\$1050	\$52	25	\$
Four months (37 CFR 1.17(a)(4))	\$1640	\$82	20	\$
Five months (37 CFR 1.17(a)(5))	\$2230	\$11	15	\$
Applicant claims small entity status. See 37	CFR 1.27.			
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this				
application to a Deposit Account.				
The Director is hereby authorized to charge the above fees, or credit any overpayment, to Deposit Account Number <u>19-1090</u> .				
to Deposit Account Number 15-1656.				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the ∐ applicant/inventor.				
☐ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
x attorney or agent of record. Registration No. <u>44,614</u>				
☐ attorney or agent under 37 CFR 1.34.				
Registration number if acting under 37 CFR 1.34				
/William T. Christiansen/	_	December 28, 2007		
Signature William T. Christianson, Ph.D.		Date		
William T. Christiansen, Ph.D. Typed or printed name	_	206-622-4900 Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.				
Submit multiple forms if more than one signature is requir SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 2231	ed.		,	1084697 1.DOC